

Foster Family Home - Corrective Action Report

Provider ID: 2-160026

Home Name: Dy Elma Akiyama, CNA

124 Alaloa Road

Hilo

HI 96720

Review ID: 2-160026-4

Reviewer: Carol Copeland

Begin Date: 3/21/2019

Foster Family Home

Required Certificate

[11-800-6]

6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

6.(d)(1) Home inspection performed to recertify three client home. Home in compliance on day of inspection. Corrective action report issued with no plan of correction due to CTA.

Carol Copeland RN, MSN
Compliance Manager

Elma
Primary Care Giver

3/21/19
Date

3/21/19
Date